

DEVON COUNTY COUNCIL

(MEDICAL DEPARTMENT).



ANNUAL REPORT

OF THE


COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1920.

EXETER.

A. WHEATON & Co., LTD., PATERNOSTER PRESS, FORE STREET.



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29159817>

INDEX OF SUBJECTS.

					PAGE.
Acute Poliomyelitis ..	..	..	..	..	14
Area, Population, etc.	..	Table I.	..	..	2
Bacteriology ..	..	..	..	..	38
Barnstaple (Port) ..	..	..	..	..	36
Births ..	..	Tables II., XI.	..	..	11
Cancer ..	..	Table X.	..	..	23
Census ..	..	Table I.	..	..
Cerebro-Spinal Fever ..	..	..	..	..	14
Closet Accommodation ..	..	..	..	..	26
Dartmouth and Totnes (Port) ..	..	..	..	..	36
Deaths ..	..	Tables III., XI., XII., XIII.	..	..	12
Diarrhœa ..	..	..	..	..	15
Diphtheria ..	..	Table VI.	..	..	14
Drainage and Sewerage ..	..	..	..	..	25
Encephalitis Lethargica ..	..	..	..	..	14
Erysipelas ..	..	Table VI	..	..
Exeter (Port) ..	..	..	..	..	37
Food ..	..	..	..	..	27
Food and Drugs Acts, etc.	..	..	..	..	29
Hawkmoor Sanatorium ..	..	..	..	..	17
Housing Accommodation ..	..	..	..	..	35
Infant Mortality ..	..	Table IV.	..	..	13
Infectious Diseases ..	..	Tables V., VI., XI.	..	..	13
Isolation Hospital Accommodation ..	..	..	..	..	21
Kingsbridge and Salcombe (Port) ..	..	..	..	..	37
Maternity and Child Welfare ..	..	..	..	..	30
Measles ..	..	..	..	..	15
Medical Officers of Health, List of ..	..	..	..	..	8
Mental Deficiency ..	..	..	..	..	35
Meteorology ..	..	..	..	..	40
Notifiable Diseases ..	..	Table VI.	..	..
Puerperal Fever ..	..	Table VI.	..	..
Plymouth (Port) ..	..	..	..	..	37
Rivers and Streams ..	..	..	..	..	25
Sanitary Legislation ..	..	..	..	..	10
Sanitary Inspectors, List of ..	..	..	..	..	9
Sanitary Inspectors' Reports, Summary of ..	..	Tables XIV., XV.	..	..
Scarlet Fever ..	..	Table VI.	..	..	14
Scavenging ..	..	..	..	..	26
Schools ..	..	..	..	..	27
Small Pox ..	..	Table VI.	..	..	14
Teignmouth (Port) ..	..	..	..	..	37
Tuberculosis ..	..	Tables VII., VIII., IX., XI., XII.	..	..	16
Tuberculosis Dispensaries ..	..	..	..	..	18
Typhoid Fever ..	..	Table VI.	..	..	15
Venereal Diseases ..	..	..	..	..	20
Water Supply ..	..	..	..	..	23
Whooping Cough ..	..	..	..	..	15

**SUMMARY shewing the principal general items
of the Vital Statistics, etc., for 1920,
contained in the Report.**

Area of the Administrative County

(Census, 1911) 1,658,995 acres.

Population (estimated) .. Year 1919 392,311 **Year 1920. 407,943** persons.

Number of Sanitary Districts .. { 33 Urban, 18 Rural, } 57
6 Port

BIRTH RATE .. Year 1918. 13.2 Year 1919. 14.6 **Year 1920. 21.3**

DEATH RATE 16.8 14.5 **12.9**

Principal Infectious Diseases

Death Rate 0.3 0.19 **0.2**

Tuberculosis Death Rate .. 1.6 1.3 **1.1**

Cancer Death Rate .. 1.3 1.4 **1.4**

INFANT MORTALITY 68 75 **50**

TABLE I.
(Census, 1911.)

Districts.	Acreage.	Total Population.	No. of Separate Families	Average No. of persons per family.
URBAN.				
Ashburton	6963	2494	643	3.8
Axminster .. ..	..	1926	..	..
Bampton	7799	1572	359	4.3
Barnstaple	2235	14482	3539	4.0
Bideford	3416	9078	2021	4.4
Brixham	5626	7954	1951	4.0
Buckfastleigh ..	1365	2430	594	4.0
Budleigh Salterton ..	975	2170	582	3.7
Crediton	1087	3640	945	3.8
Dartmouth	1925	7005	1570	4.4
Dawlish	1486	4099	1066	3.8
Exmouth	4630	11962	2992	3.9
Holsworthy	703	1499	310	4.8
Honiton	3134	3191	751	4.2
Ilfracombe	5627	8935	2205	4.0
Ivybridge	651	1730	407	4.2
Kingsbridge	1046	3049	744	4.1
Lynton	7202	1770	421	4.2
Newton Abbot	4153	13711	3210	4.2
Northam	3088	5500	1272	4.3
Okehampton	503	3174	652	4.8
Ottery St. Mary ..	10008	3699	926	3.9
Paignton	5188	11241	2714	4.1
Salcombe	1181	2032	518	3.9
Seaton	1178	1694	393	4.3
Sidmouth	1572	5612	1200	4.6
South Molton	5910	2742	727	3.7
Tavistock	1562	4392	1083	4.0
Teignmouth	1589	9215	2376	3.8
Tiverton	17679	10205	2481	4.1
Torrington, Great ..	3592	3041	737	4.1
Torquay	3906	38771	8459	4.5
Totnes	1422	4128	951	4.3
Total	118401	208146	48800	4.2
RURAL.				
Axminster	52135	12338	2959	4.1
Barnstaple	129768	18229	4328	4.2
Bideford	55975	6355	1450	4.2
Broadwoodwidge ..	29294	2390	530	4.5
Crediton	93370	10919	2630	4.1
Culmstock	20972	3346	784	4.2
Holsworthy	79518	7022	1591	4.4
Honiton	73043	9600	2264	4.2
Kingsbridge	70818	11645	2852	4.0
Newton Abbot	99173	19507	4591	4.2
Okehampton	132818	13600	3166	4.2
Plympton St. Mary ..	73413	21436	4658	4.6
South Molton	117432	10908	2420	4.5
St Thomas	115100	26501	5942	4.4
Tavistock	151616	16228	3624	4.4
Tiverton	85368	15126	3577	4.2
Torrington	79803	8970	2071	4.3
Totnes	80978	12293	2800	4.3
Total	1540594	226413	52277	4.3
Administrative County	1658995	434559	101077	4.3
England and Wales ..	37337630	36075269	8018857	4.4

MY LORDS AND GENTLEMEN,

I have the honour to present my thirteenth Annual Report, which deals with health matters in the Administrative County for the year 1920. It has been drawn up in accordance with the instructions issued by the Ministry of Health.

During the year there have been 2,800 more births than in 1919, with a birth rate of 21.3, against 14.6 for last year. It is 4.1 less than that for England and Wales for the same period. There have been 418 less deaths, the rate being 12.9, against 14.5 for 1919. For England and Wales it was 12.4. Influenza caused 100 deaths, against 346 and 833 for the two previous years. The infectious diseases death rate has slightly increased, but the infant mortality has decreased by 25 per 1,000 over that of 1919, the rates being 50 and 75 respectively. That for England and Wales was 80 per 1,000. The tuberculosis death rate has fortunately again declined, as I stated in my last Annual Report I considered we had reached the high water of the causes relative to the Great War. The death rate has fallen from 1.3 per 1,000 for 1919 to 1.1 per 1,000 for 1920. Our future victory lies along the paths of education of the general public in relation to this social disease, and as Sir Geo. Newman says "there is no beaten track in the future conquest of tuberculosis, only by co-ordinate action along various paths, and by all concerned and only by surveying the complex problem as a whole in the spirit of preventive medicine, can tuberculosis be successfully overcome?" We must protect the healthy child and adult from mass infection, we must increase all the powers of resistance, and we must treat the patient; fifty years ago the death rate for Phthisis was 2.4 per 1,000 and from that date to 1920 it has fallen to .8 per thousand. Devon is fortunate in having three good expert Tuberculosis Officers who, as consultants, are steadily gaining the confidence of

the general practitioners, and thereby getting hold of the early cases and their contacts, but we are still in much need of more accommodation for children and for advanced cases, and the services of highly trained health visitors for preventive work. As the products of the war are passing away, it is to be hoped that Hawkmoor will soon be able to resume its proper function as a "sanatorium," whose primary objects should be education and curative treatment of early cases by auto-inoculation, and cease to be in a measure a mere Tuberculosis Home. The subject of "After Care," so important in this disease is a very difficult matter as it is so intimately connected with finance.

Maternity and Child Welfare has received a good deal of attention during the year, and still requires much more intensive work, for it is hardly too much to say that the health of the mother and child is the basis of the health of the community, for here is the source of the nation; the question of their health should therefore stand first in the minds of all health authorities. The infant mortality rate has fallen in England and Wales from 156 per 1,000 in 1896-1900 to the figure of 80 in 1920. That for Devon has fallen to 50.9 per 1,000, the lowest on record. In 1919 the county infant mortality rate for legitimate births was the lowest in all the South Western Counties, and the 9th lowest of all the 61 Administrative Counties. Perhaps some credit of this is due to the work of the 20 Health Visitors in their home visiting and at the maternity centres, under the skilled guidance of Miss Booker, the chief Health Visitor. It is to be regretted that economy should have been fixed on the limitation of the number of these valuable officials, for I feel sure that still greater improvement would have taken place both in regard to infants and school children had their number been increased by fifty per cent. Unfortunately, maternal mortality shows little tendency to decrease in England and Wales: it was 4.8 per 1,000 births twenty years ago, and it has only fallen to 4.3 for 1920. It is a sad reflection on preventive medicine that we in this county should lose about 30 mothers each year during a purely physiological function. This also means there must be an unknown quantity of crippling effects

in those who escape with their lives. As Sir George Newman says "undoubtedly the solution of this grave situation is mainly dependent upon improved midwifery." For this we want a large staff of more highly qualified midwives, and this will only come about when midwives are fully trained nurses in receipt of a much higher salary than they at present obtain.

Fortunately, many of the infectious diseases, such as measles and scarlet fever, although very prevalent from time to time, are gradually ceasing to exhibit the virulence of by-gone days. A warning note is, however, necessary in regard to the amount of inflammable material present for outbreaks of small pox; this refers to the numbers of unvaccinated persons, in 1907 (13 years ago), the percentage of vaccination to births stood at 70.9, whilst in 1919 it had descended to the low figure of 40.6. This is a condition which requires serious consideration.

Venereal diseases still present their difficult problems, and can only be dealt with on moral, as well as medical grounds. It is impossible to tell the amount prevalent in the county until some efficient propaganda work has been undertaken. There has been some increase in the number of cases attending the two clinics provided in Exeter and Plymouth, although in England and Wales the total number of new cases dealt with for the first time increased from 29,036 in 1917 (when the Regulations came into force) to 105,185 in 1920.

It is gratifying to report that no fresh outbreaks of Rabies occurred in the county during 1920, although 34 were reported elsewhere in the country. Twenty-one persons were bitten by rabid animals, but no case of human hydrophobia occurred: twenty of these cases received specific treatment, which can now be obtained in England. Formerly patients had to take the journey to Paris.

In the matter of Cancer, with its increasing number of deaths each year, it is amazing that although one person out of every six dies of cancer, no serious attempt has been made to deal with the problem from the public health point of view. Cancer is not communicable, but it certainly can often be prevented. There are the

subjects of particular foods, supposed cancer houses, certain trade influences, the efficient public dental service, the psychology of the precancerous stage, influence of senility and the action of the endocrine glands, which all require further investigation in their bearing on the prevalence of the disease.

The Housing question has been much in evidence during the year, but not too much. Difficulties in the cost and supply of material and sites have confronted all authorities in the matter of the provision of new houses. It is regretted that more attention has not been devoted to rendering old houses habitable, for there are few with good walls and a roof which cannot, by additions or otherwise, at a less cost than the building of a new house, be made fit for occupation, in addition there is often the advantage of a garden in being, with outhouses, and a water supply and drainage. Dr. Date is giving attention to this matter in order to stimulate local authorities to make use of the legal powers which have been so much neglected in the past.

In conclusion, one cannot help emphasising the still further claim for preventive medicine in the place of curative medicine. It was not intended that man should suffer all the ills he does, or that we should have about 1,000 funerals a week from Tuberculosis, and 1,200 more funerals per week of dead infants in this country. Also with progressive education on the causes of ill health, one hopes that it will not be necessary in the near future for 50 per cent. of insured people to receive treatment during a year at the hands of 12,000 doctors, who in 1920 wrote 29 million prescriptions which cost £1,247,137 in drugs. The recipients of these prescriptions represent an average yearly minimum of 14,000,000 weeks of lost time, a period approximately equal to 270,000 years, all of it due to sickness, and most of it due to preventable sickness.

Surely with these facts before us, it can only be false economy to curtail the expenditure on matters which make for better health, such as wholesome water, proper ventilation, nutritious food, with healthy occupation and recreation, and better housing, especially in regard to children, where the beginning of disease are so manifest. I cannot let this occasion pass without expressing my regret

that whereas the Ministry of Health was constituted mainly to concentrate all health matters under one administration, in order to make for efficiency and prevent overlapping, there is a tendency for the lesser authorities to run their different public health committees in water-tight compartments. This refers to the subjects of Maternity and Child Welfare, Mental Diseases and Blindness, in spite of Sec. 71 of the Housing, Town Planning, etc., Act, 1909, which states that "all matters relating to the exercise and performance of the County Council of their powers and duties as respect public health (except the powers of raising a rate or borrowing money) shall stand referred to the "public health committee" and the county council, before exercising any such powers shall, unless in their opinion the matter is urgent, receive and consider the report of the "public health committee" with respect to the matter in question."

I am,

Your obedient Servant,

GEORGE ADKINS.

27

SEPT

1921

LIST OF MEDICAL OFFICERS OF HEALTH.

District.	Name	Date Report received.	Report Printed or otherwise.
URBAN.			
		1921.	
Ashburton ..	Dr. S. C. Jellicoe ..	27th May	Printed
Axminster ..	.. William Langran ..	2nd May	Typewritten
Bampton ..	.. T. W. Widger Bovey ..	21st April	Printed
Barnstaple ..	.. H. C. Jonas ..	7th May	Printed
Bideford ..	.. Ellis Pearson ..	31st May	Printed
Brixham ..	.. J. F. Falconer ..	16th April	Printed
Buckfastleigh ..	.. Sydney R. Williams ..	No report	received
Budleigh Salterton ..	.. Clarence Beesley ..	20th May	Printed
Crediton ..	.. H. F. L. Hugo ..	7th May	Printed
Dartmouth ..	.. J. H. Harris ..	4th April	Printed
Dawlish ..	.. H. B. Mapleton ..	27th June	Printed
Exmouth ..	.. Clarence Beesley ..	20th May	Printed
Holsworthy ..	.. W. G. Gray ..	No report	received
Honiton ..	.. A. E. Ash ..	29th April	Printed
Ilfracombe ..	.. E. J. Slade-King ..	23rd May	Printed
Ivybridge ..	.. W. A. Trumper ..	2nd May	Printed
Kingsbridge ..	.. W. T. Webb ..	No report	received
Lynton ..	.. H. G. Falkner ..	4th April	Typewritten
Newton Abbot ..	.. H. B. Mapleton ..	9th May	Printed
Northam ..	.. Edwin J. Toye ..	23rd April	Printed
Okehampton ..	.. C. C. Court ..	No report	received
Ottery St. Mary ..	.. J. A. W. Ponton ..	16th March	Typewritten
Paignton ..	.. R. Julyan George ..	30th May	Printed
Salcombe ..	.. Daniel O. Twining ..	7th March	Printed
Seaton ..	.. F. M. Reynolds ..	18th May	Printed
Sidmouth ..	.. J. Sheldon Withers ..	28th Feb.	Typewritten
South Molton ..	.. Philip H. Seal ..	15th April	Printed
Tavistock ..	.. J. Leslie Watt ..	12th April	Printed
Teignmouth ..	.. F. Stanley L. Piggott ..	12th May	Printed
Tiverton ..	.. R. Burgess ..	28th May	Printed
Torrington, Great ..	.. F. Pridham ..	10th April	Printed
Torquay ..	.. T. Dunlop ..	20th May	Printed
Totnes ..	.. H. R. Allingham ..	19th April	Printed
RURAL.			
Axminster ..	Dr. William Langran ..	27th April	Typewritten
Barnstaple ..	.. J. R. Harper ..	12th April	Printed
Bideford ..	.. Leonard B. Betts ..	1st July	Printed
Broadwoodwidge ..	.. A. Budd ..	No report	received
Crediton ..	.. L. Powne ..	7th May	Printed
Culmstock ..	.. S. F. Huth ..	9th April	Printed
Holsworthy ..	.. W. G. Gray ..	No report	received
Honiton ..	.. D. Steele Perkins ..	11th May	Printed
Kingsbridge ..	.. W. T. Webb ..	30th May	Printed
Newton Abbot ..	.. H. B. Mapleton ..	23rd May	Printed
Okehampton ..	.. C. C. Court ..	3rd June	Printed
Plympton St. Mary ..	.. S. Noy Scott ..	2nd June	Printed
South Molton ..	.. George F. Sydenham ..	19 April	Typewritten
St Thomas ..	.. L. P. Black ..	13th July	Printed
Tavistock ..	.. C. C. Brodrick ..	14th July	Printed
Tiverton ..	.. John R. R. Pollock ..	29th April	Typewritten
Torrington ..	.. E. J. Slade-King ..	13th June	Printed
Totnes ..	.. S. C. Jellicoe ..	8th June	Printed

LIST OF MEDICAL OFFICERS OF HEALTH—*Continued.*

District.	Name.	Date Report received.	Report printed or otherwise.
PORT.			
		1921.	
Barnstaple ..	Dr. W. A. Valentine ..	24th May	Manuscript
Dartmouth & Totnes ..	„ J. H. Harris ..	5th February	Printed
Exeter ..	„ Clarence Beesley ..	2nd June	Typewritten
Kingsbridge & Salcombe ..	„ D. O. Twining ..	30th April	Typewritten
Plymouth ..	„ F. M. Williams ..	19th March	Typewritten
Teignmouth ..	„ F. Stanley-Piggott ..	12th May	Printed

LIST OF SANITARY INSPECTORS.

District.	Name.	Date Report Received.
URBAN.		
		1921.
Ashburton ..	Alfred Wilson ..	19th March
Axminster ..	W. H. Biggs ..	29th January
Bampton ..	Ernest Rogers ..	No report received
Barnstaple ..	John Hill ..	25th February
Bideford ..	John Lugg ..	1st March
Brixham ..	James H. Lowe ..	No report received
Buckfastleigh ..	Lionel M. Williams ..	29th January
Budleigh Salterton ..	John B. Holden ..	5th March
Crediton ..	I. J. Leach ..	6th April
Dartmouth ..	Alfred J. Willett ..	28th February
Dawlish ..	C. F. C. Churchward ..	3rd March
Exmouth ..	James Wilson ..	24th March
Holsworthy ..	Fredk. Vanstone ..	4th March
Honiton ..	John Wm. Jones ..	5th March
Ilfracombe ..	Herbert J. Karslake ..	25th February
Ivybridge ..	William H. Full ..	2nd February
Kingsbridge ..	John Hole ..	19th February
Lynton ..	Alfred F. Gibbs ..	15th February
Newton Abbot ..	Henry Judd ..	2nd February
Northam ..	Arthur Richards ..	7th April
Okehampton ..	G. J. Holmes ..	No report received
Ottery St. Mary ..	Ernest Rogers ..	10th February
Paignton ..	Joseph Crathorn ..	2nd March
Salcombe ..	J. G. Howard ..	31st May
Seaton ..	E. W. Skinner ..	26th May
Sidmouth ..	E. St. Leger Whitford ..	19th February
South Molton ..	Ralph Watson ..	28th February
Tavistock ..	Frederick Camble ..	8th March
Teignmouth ..	Fredk. J. Thick ..	28th February
Tiverton ..	John Siddalls ..	28th May
Torrington, Great ..	G. Leate ..	14th February
Torquay ..	Charles MacMahon ..	24th March
Totnes ..	G. H. W. Widger ..	No report received

LIST OF SANITARY INSPECTORS—*Continued.*

District.	Name.	Date Report Received.
		1921.
RURAL.		
Axminster ..	W. H. Biggs	29th January
Barnstaple ..	John Ackland and David J. Dean	1st March
Bideford ..	Henry D. Dack	.. 18th April
Broadwoodwidge ..	James Frayne	.. 6th April
Crediton ..	Samuel Pridham	.. 4th March
Culmstock ..	Harold W. James	.. 26th February
Holsworthy ..	Harold E. Cackett	.. 17th May
Honiton ..	A. J. Redfern	.. 24th May
Kingsbridge ..	Tom Burdett	12th February
Newton Abbot ..	Richard Alfred Rogers	.. 26th February
Okehampton ..	P. R. B. Pearce	4th April
Plympton St. Mary ..	Wm. Edward Horton	.. 11th April
South Molton ..	William S. Gardner	.. 17th February
St. Thomas ..	Edward Hare Quick	.. 1st March
Tavistock ..	Thos. Hy. Harris	.. 18th April
Tiverton ..	Robert Ellis	.. 28th February
Torrington ..	Richard Gomer	.. 23rd March
Totnes ..	W. F. Follet	.. 1st June
„ ..	Wm. Hy. Full	.. 2nd February

SANITARY LEGISLATION.

There were three Acts of Parliament dealing especially with Public Health passed during the year :—

(1) *Blind Persons' Act, 1920.* The two chief items are (a) Every blind person on attaining the age of 50 shall be entitled to the same benefits as persons reaching the age of 70 under the Old Age Pensions Acts, 1908-1919. (b) It shall be the duty of every County and every County Borough to make arrangements for promoting the welfare of blind persons ordinarily resident within their areas.

(2) *Census Act, 1920.* This Act, unlike the former decennial Census Acts, is a permanent one and permits of a general census being made at intervals of not less than five years ; also a local census may be taken at anytime or times without limitation as the intervals between.

(3) *National Insurance Act, 1920.* The principal items of which are (a) increased sickness benefit pay to 15s. for men, 12s. 6d. for a woman, and maternity benefit two pounds, with a corresponding increase in contributions by employers and employees. (b) the raising of the limit of salary to £250 in substitution for £160 for contributors. (c) The removal of sanatorium benefits from the provisions of the Insurance Acts.

In addition to, and explaining some Acts of Parliament, the different Ministries issued the following Memoranda, Orders and Circular Letters :—Charities for the Blind Regulations. Memorandum as to Schemes under the Blind Persons' Act. Census Orders, Census Regulations, Model Clauses for Bye-Laws for houses let in lodgings, Rules for the Employment of Children in Entertainments, Circular on Maternity and Child Welfare Schemes for Children of Sailors, Soldiers and Airmen, Regulations for Cremation, Board of Education Circulars re Medical Examination of Supplementary Teachers, Food Control Circulars, Housing of the Working Classes Regulations, Port Sanitary Administration and Inspection of Aliens Circular, and Infectious Diseases Regulations, Training of ex-Service Men as Sanitary Inspectors Circular, Sanitary Condition of Theatres, Music Halls, etc. Circular, Orders for the transference of the Anatomy Acts, Mental Deficiency and Lunacy Acts to the Ministry of Health, Several Circulars in regard to Tuberculosis Treatment, Memoranda in regard to reports of Analysts and M.O.H. in regard to the sale of Food and Drugs.

BIRTHS.

During the year, 8,792 births (urban 4,202, rural 4,590) were registered in the County, against 5,995, 5,535, 5,491, 6,707 and 6,954 for the five preceding years. The birth rate was 21.3 per 1,000, against 14.6, 13.2, 13.3, 15.9 and 16.6 for the five previous years.

ILLEGITIMATE BIRTHS.

There were 439 (urban 238, rural 201) registered, giving a rate of 5.6 per cent. for the urban, and 4.3 per cent. for the Rural areas,

with a general rate of 4.9 per cent. for the County, against 7.5, 7.9, 6.5, 5.6, 4.4, 4.5 and 4.1 for the seven previous years.

TABLE II.
BIRTH RATES.

Districts.	Rates per 1,000 of population.									
	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Urban . . .	18.1	18.1	17.0	16.2	15.6	14.8	12.4	12.3	14.1	20.2
Rural . . .	19.6	18.7	18.5	18.1	17.6	16.8	14.1	14.1	15.2	22.4
Administrative County	18.8	18.4	17.7	17.2	16.6	15.9	13.3	13.2	14.6	21.3
England and Wales .	23.4	22.5	22.3	22.2	20.7	21.6	17.8	18.7	18.5	25.4

DEATHS.

The total number of deaths registered during the year was 5,292 (urban 2,750, rural 2,542) against 5,710, 6,270, 5,899, 5,941 and 5,595 for the previous five years.

The net death rate was 12.9 per 1,000, against 14.5, 16.8, 15.9, 15.3 and 14.8 for the five preceding years.

TABLE III.
DEATH RATES.

Districts.	Rates per 1,000 of population.									
	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Urban . . .	13.6	14.1	13.3	13.2	15.6	15.9	17.2	17.4	14.4	13.3
Rural . . .	13.3	12.4	12.3	12.4	14.1	14.7	14.7	16.2	14.6	12.5
Administrative County	13.7	12.9	12.8	12.8	14.8	15.3	15.9	16.8	14.5	12.9
England and Wales .	13.1	12.1	12.1	12.4	13.6	14.0	14.4	17.6	13.8	12.4

INFANT MORTALITY.

By this is meant the number of deaths that occur among infants under one year of age, reckoned as so many per 1,000 of the births registered. It is generally held as the most delicate index of the efficiency of the sanitary administration of a district taken in its broadest sense.

The rate for the County was 50, against 75 for the previous year. That for England and Wales being 80 against 89 for 1919. It is the lowest rate on record.

TABLE IV.

DEATH OF CHILDREN UNDER 1 YEAR.

Districts.	Rates per 1,000 Registered Births.									
	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Urban . . .	103	75	84	67	87	74	77	68	75	53
Rural . . .	89	72	69	60	81	66	63	67	76	48
Administrative County	96	73	76	63	84	70	69	68	75	50
England and Wales .	118	86	96	92	98	91	97	97	89	80

DISEASES AMENABLE TO SANITARY REGULATIONS.

Under this heading are included the seven infectious diseases which come under the Notification (Infectious Diseases) Act, 1889. These are small-pox, scarlet fever, diphtheria, membranous croup, typhoid fever, puerperal fever and erysipelas. To this list are added measles and whooping-cough, as these can be modified or prevented by sanitary regulations.

INFECTIOUS DISEASES.

CEREBRO-SPINAL FEVER.

Four cases with no deaths were reported against 9 cases with 6 deaths for the previous year.

ACUTE POLIOMYELITIS.

There were 3 cases with no deaths reported against 10 cases with no deaths for the previous year.

ENCEPHALITIS LETHARGICA.

Eight cases were notified, with 6 deaths, against 7 cases for last year.

SMALL-POX.

Two cases were notified in the Port district of Plymouth, but none in the urban or rural districts for the eighth year in succession, *although several suspicions were reported*. In England and Wales there were 274 cases against 294 for the previous year.

SCARLET FEVER.

This disease occurred in 26 of the urban, and in all of the rural areas. There were 473 (urban 216, rural 255, port 2) cases notified, with 6 deaths, against 444 cases with 5 deaths for the previous year. The attack rate for the County was 1.13, against 1.13 for the previous year.

DIPHTHERIA.

During the year this disease was reported in 23 of the urban, and in all but 2 of the rural areas. There were 570 (urban 341

rural 227, port 2) cases notified, with 58 (urban 41, rural 17) deaths. Last year 451 cases with 29 deaths were reported. The percentage mortality rate for the cases notified was 10.3, against 6.4, 9.2, 8.2, 10.2 and 8.7 for the five previous years. The attack rate for the County was 1.39 per 1,000 of the population, against 1.15 for the previous year.

TYPHOID FEVER.

There were 33 (urban 17, rural 6, port 10) cases notified, with 5 deaths, against 34 cases with 3 deaths for the previous year. The disease was reported in 11 of the urban, in 3 of the rural, and 1 of the port areas. The attack rate for the County was 0.08 per 1,000 population, against 0.09 for the previous year.

MEASLES.

This disease caused 14 deaths (urban 10, rural 4), against 16 for the previous year.

DIARRHŒA.

During the year 33 deaths (urban 19, rural 14) were registered from this disease, which occurred in children under two years of age, against 24 for the previous year.

WHOOPING-COUGH.

This disease caused 23 deaths during the year, against 16, 32, 20, 51 and 42 for the five previous years.

ERYSIPELAS.

This disease caused 6 deaths, against 8 deaths for 1919.

TABLE V.

DEATHS FROM THE PRINCIPAL INFECTIOUS DISEASES

Districts.	Rates per 1,000 of population.									
	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Urban . . .	0.8	0.4	0.3	0.3	0.5	0.4	0.2	0.4	0.2	0.3
Rural . . .	0.5	0.3	0.3	0.3	0.5	0.4	0.2	0.2	0.1	0.2
Administrative County	0.6	0.4	0.3	0.3	0.5	0.4	0.2	0.3	0.1	0.2

TUBERCULOSIS.

Under this heading are included all the diseases caused by the tubercle bacillus, chief amongst which is phthisis, or, as it is officially known, "pulmonary tuberculosis." From this disease there were 396 (urban 224, rural 172) deaths, against 421, 517, 463, 418, 390, 390 and 437 for the seven preceding years. There were 83 deaths, against 105, 100 and 106 for the 3 previous years, due to the bacillus in other organs of the body. These together accounted for 479 deaths, against 526, 617 and 569 for the three previous years, with a rate of 1.1 per 1,000 population against 1.3, 1.6, 1.5, 1.3, 1.1, 1.1, and 1.0 for the seven preceding years.

Under the Tuberculosis Regulations, 1912, 1,163 cases of tuberculosis (pulmonary 993, others 170) were notified in the County, against 1,010, 1,208, 1,002, 778 and 707 for the five previous years.

There is little alteration in the practice of notification by medical practitioners, with its consequent ill effect on curative and preventive treatment. According to the returns of the registrars of deaths for the year ending 1920, 15.7% of the deaths occurred two years after notification, 15.4% after one year, 16.9% after six months, 23.4% after one month, 7.4% after one week, 4.9% were notified after death, and 20.9% were never notified at all.

TABLE VI.
1920.
NOTIFIABLE DISEASES.
(Act 1899.)

DISTRICTS.	Small Pox.		Scarlet Fever.		Diphtheria & Membranous Croup		Enteric Fever		Puerperal Fever		Erysipelas.		Total.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
URBAN.														
Ashburton	1	..	2	..	..	..	..	..	..	..	3	..
Axminster	1	..	3	..	..	..	..	..	..	..	4	..
Bampton	6	..	..	..
Barnstaple	23	..	23	..	2	1	..	..	..	1	94	..
Bideford	9	..	78	..	1	..	4	..	3	..	95	9
Brixham	1	..	19	2	2	1	..	..	3	..	25	3
Buckfastleigh	No	report	received	..	..	..	..	..	..
Budleigh Salterton	2	..
Crediton	3	..	4	..	..	..	..	..	..	..	7	..
Dartmouth	2	1	26	3	1	..	..	..	4	..	33	4
Dawlish	7	..	3	..	..	..	..	..	..	..	10	..
Exmouth	1	..	..	..	..	..	1	..	4	..	6	..
Great Torrington	1	..	..	..	..	..	..	..	1	..
Holsworthy	No	report	received	..	..	..	..	..	..
Honiton	1	1	..	1	1	..	2	2
Ilfracombe	4	1	1	..	1	..	..	..	2	..	8	1
Ivybridge
Kingsbridge	3	No	report	received	..	..	..	..	..	3
Lynton	12	1	..	..	..	..	1	..	13	1
Newton Abbot	3	..	38	10	..	..	..	..	1	..	42	10
Northam	3	..	16	2	..	..	..	..	..	1	19	3
Okchampton	No	report	received	..	..	..	..	..	..
Ottery St. Mary	2	..	3	..	..	..	..	..	5	..
Paignton	3	..	23	2	..	..	1	1	3	..	30	3
Salcombe	1	..	..	..	..	..	..	..	1	..	2	..
Seaton
Sidmouth	4	..	1	..	..	..	..	..	1	..	6	..
South Molton	12	..	10	..	..	..	..	..	3	..	25	..
Tavistock	2	..	..	..	..	..	..	..	..	..	2	..
Teignmouth	6	..	21	2	3	1	..	..	7	..	37	3
Tiverton	12	1	5	..	..	..	2	1	1	..	20	2
Torquay	12	..	34	4	1	1	..	..	..	1	83	6
Totnes	1	..	21	3	..	..	..	..	..	..	22	3
Totals	181	3	343	41	15	5	9	3	47	3	595	55
RURAL.														
Axminster	4	..	1	..	..	..	..	..	1	..	6	..
Barnstaple	22	1	9	..	..	..	1	..	5	..	37	1
Bideford	16	..	31	..	..	..	..	..	1	..	48	..
Broadwoodwider	No	report	received	..	..	..	..	..
Crediton	22	..	2	1	..	..	..	..	3	..	27	1
Culmstock	4	..	..	..	..	..	..	..	..	..	4	..
Holsworthy	2	No	report	received	..	..	..	..	..	2
Honiton	5	..	7	1	..	..	1	..	2	..	15	1
Kingsbridge	13	..	3	..	..	..	..	..	5	..	21	..
Newton Abbot	17	..	30	3	2	..	..	..	10	2	59	5
Okchampton	1	..	32	3	..	..	..	1	6	..	39	4
Plympton St. Mary	31	1	27	2	1	..	2	2	10	..	71	5
South Molton	8	..	35	1	1	..	..	..	3	..	47	1
St. Thomas	21	1	14	1	..	..	1	1	3	..	39	3
Tavistock	7	..	1	..	1	..	1	..	3	1	13	1
Tiverton	57	..	3	..	..	..	1	..	..	..	61	..
Torrington	2	..	5	3	..	..	..	1	..	..	7	4
Totnes	14	..	6	..	..	..	1	1	2	..	23	1
Totals	244	3	206	17	5	..	8	6	54	3	517	29
PORT.														
Barnstaple
Dartmouth and Totnes	1	..	..	..	8	..	..	..	..	..	9	..
Exeter
Kingsbridge & Salcombe
Plymouth	2	..	1	..	2	..	11	..	..	..	..	..	16	..
Teignmouth
Totals	2	..	2	..	2	..	19	..	..	..	..	..	25	..
Administrative County	2	..	427	6	551	58	39	5	17	9	101	6	1137	84

**TABLE VII.
TUBERCULOSIS.**

	BARNSTABLE DISTRICT.						EXETER DISTRICT.						PLYMOUTH DISTRICT.						GRAND TOTAL.
	Insured.		Non-insured.		Total.		Insured.		Non-Insured		Total.		Insured.		Non-Insured		Total.		
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
New In-patients at Dispensary ..	..	3	1	..	1	3	31	13	2	16	33	29	31	..	..	..	31	..	97
New Out-patients at Dispensary ..	175	15	19	21	194	36	94	14	14	8	108	22	2	..	..	..	2	..	362
Old " " "	767	123	74	96	841	219	1151	174	183	258	1334	432	35	1	..	..	35	1	2862
Number of first visits paid : Pulmonary tuberculosis	205	50	42	64	247	114	70	24	27	53	97	77	252	88	90	201	342	289	1166
Surgical tuberculosis ..	13	4	12	20	25	24	3	2	7	6	10	8	17	10	28	34	45	44	156
Non tuberculosis ..	4	6	58	68	62	74	..	..	1	1	1	1	7	1	6	11	13	12	163
Suspect and remaining under observation	14	5	16	27	30	32	4	5	5	5	9	10	6	3	12	22	18	25	124
Pulmonary tuberculosis in early stages	99	25	30	36	129	61	20	10	14	15	34	23	37	25	27	55	64	80	391
" " medium stages	60	17	5	11	65	28	37	14	11	22	48	36	113	35	35	92	148	127	452
" " advanced stages	46	8	7	17	53	25	6	3	4	12	10	15	97	29	29	55	126	84	313
Unreported tuberculosis (including contacts)	75	41	79	145	154	186	..	..	10	1	10	1	155	44	64	133	219	177	747
New cases under 5 years of age ..	..	..	2	1	2	1	1	..	3	3	4	3	..	..	7	10	7	10	27
" " between 5 and 16 years ..	..	..	40	31	40	31	3	3	17	24	20	27	..	2	83	95	83	97	298
" " between 16 and 25 years ..	72	28	3	13	75	41	19	16	1	10	20	26	79	58	7	24	86	82	330
" " between 25 and 35 years.	71	20	3	18	74	38	28	11	2	8	30	19	80	22	11	46	91	68	320
" " between 35 and 45 years ..	49	2	2	9	51	11	22	6	2	8	24	14	64	11	14	47	78	58	236
" " over 45 years ..	26	4	4	12	30	16	7	2	6	12	13	14	40	7	12	37	52	44	169
Re visits	769	284	286	485	1055	769	404	237	162	309	566	546	1151	432	295	705	1446	1137	5519
Number of contacts examined ..	187	190	378	975	565	1165	159	85	253	534	412	619	62	41	586	805	648	905	4315
" of new contacts ..	10	11	18	25	28	36	107	54	134	229	241	283	38	21	156	235	194	256	1038
" of tuberculosis contacts ..	15	13	25	37	40	50	4	5	23	28	27	33	31	16	34	84	65	100	315
" of non-tuberculosis contacts ..	169	170	337	897	506	1067	..	..	..	1	..	1	3	4	71	97	74	101	1749
" of contacts suspect and remaining under observation	3	7	26	41	29	48	1	5	6	9	7	14	4	1	52	52	56	53	207
New cases probably due to direct personal or house infection	53	31	32	45	85	76	1	2	2	5	3	7	67	48	79	134	146	182	499
" " aggravated by nature of employment	149	17	10	11	159	28	2	1	..	..	2	1	168	5	11	2	179	7	376
" " where patient is unable to have a separate bedroom	93	19	30	46	123	65	35	13	14	25	19	38	12	5	30	46	42	51	368
" " living under insanitary conditions	..	1	1	3	1	4	6	6	6	7	12	13	5	1	11	12	16	13	59
Cases in which bacteriology was employed	156	28	21	45	177	73	86	23	19	21	105	44	195	57	29	69	224	126	749
" newly treated in shelters ..	4	2	..	..	4	2	7	..	..	1	7	1	3	1	..	1	3	2	19
" newly receiving tuberculine treatment	..	1	..	1	..	2	..	..	..	..	..	..	..	..	1	1	1	1	4
" for which nurses were newly employed	..	..	..	1	..	1	2	..	..	1	2	1	2	4	1	1	3	5	12
Houses reported to Sanitary Authorities	..	1	1	3	1	4	7	4	7	9	14	13	9	1	3	15	12	16	60

	"HAWKMOOR"	"IVYBANK."		TORQUAY DISPENSARY. (SMYRNA.)		BARNSTAPLE DISPENSARY.	
	In-Patients.	In-Patients	Out-Patients.	In-Patients.	Out-Patients.	In-Patients.	Out-Patients.
			County.				
Admitted ..	229	62	145	31	2	4	230
Discharged ..	240	66	57	30	3	11	187
Remaining under treatment 31st Dec., 1920.	55	16	269	14	51	..	144

TABLE VIII.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912

SUMMARY OF NOTIFICATIONS DURING THE PERIOD FROM THE 4th JANUARY, 1920, TO THE 1st JANUARY, 1921.

Age-periods.	Notifications on Form A.												Notifications on Form B.				Number of Notifications on Form C.			
	Number of Primary Notifications.											Total Notifications on Form A.	Number of Primary Notifications			Total Notifications on Form B.	Poor Law Institutions.	Sanatoria.		
	0—1	1—5	5—10	10—15	15—20	20—25	25—35	35—45	45—55	55—65	65 and upwards		Total. Primary Notifications	Under 5	5—10				10—15	Total Primary Notifications
Pulmonary Males ..	0	4	15	32	52	91	127	108	38	25	16	508	508	1	2	1	4	4	1	191
„ .. Females	0	2	20	34	53	74	119	85	37	26	20	470	470	—	5	2	7	7	4	107
Non-pulmonary Males	1	7	18	10	10	9	9	10	1	2	1	78	78	—	—	—	—	—	—	3
„ .. Females	3	4	8	13	14	14	12	9	3	1	2	83	83	—	1	1	2	2	1	6

The County scheme for treatment was fully set out in last year's report, and it will only be briefly mentioned now. It consists of :

(1) *A Sanatorium* at "Hawkmoor," Bovey Tracey, of 80 beds (40 male and 40 female) accommodated in three pavilions, with special buildings for administrative purposes. It was hoped that some enlargement might be made by the provision of another pavilion, a large recreation room and workshops for ex-soldier patients out of the grant made by the Red Cross Society. This grant was originally, £20,000, but it has now been curtailed to £6,000, with a chance still of its total withdrawal on account of the restriction imposed in its application. It was also hoped that the accommodation for children (32 beds) would have been finished, as the main part of the wooden pavilion has been erected. Unfortunately the Ministry of Health have decreed, on the score of economy, that no further work on this shall be undertaken.

The following is the Medical Superintendent's (Dr. Smyth) report :—

Patients admitted	..	..	..	229
<hr/>				
Males, Ex-Service	..	..	..	132
„ Non-Service	..	..	..	9
Females	..	..	..	88
<hr/>				
				229
Males.		Females.		
Under 5 years	Nil.	„ 15	„	12
„ 15	2	„ 25	„	39
„ 25	49	„ 35	„	25
„ 35	51	„ 45	„	11
„ 45	34	„ 55	„	1
„ 55	5	Under 5 years Nil.		
<hr/>		<hr/>		
141		88		
<hr/>		<hr/>		

Number of Patients discharged	..	..	240
Males	..	..	146
Females	..	..	94
	st.	lbs. oz.	lbs. oz.
199 Gained	103	10 13	Average gain 7 4
34 Lost	8	6 6	Average loss 2 4
7 No Record.			
Unimproved	..	..	16
Disease arrested	..	..	110
Improved	..	..	102
Discharged themselves	..	..	12
			240
Patients' Days			25,617
Average length of stay	..	..	106 days

(2) *A Preventorium.* This is provided at Sydney House, Torrington, where accommodation is available for 40 children, who are reported to be threatened with tuberculosis disease. They are commonly known as "Pre-tuberculous" cases. The experimental stage of one year for this Institution terminated in April, and the sanction of the Ministry of Health is now desired to carry it on as a permanent institution on account of the excellent results so far obtained.

(3) *Dispensaries.* The three dispensaries, situated respectively at Barnstaple, Exeter and Torquay, have maintained their usefulness under the administration of the Tuberculosis Officers, and have conformed to the uses set out in the Report of the Departmental Committee, especially in regard to their being receiving and clearing houses and centres for diagnosis and observation, with the Tuberculosis Officer more and more taking the position of a consultant physician.

(4) *Hospitals.* During the year advanced and observation cases were accommodated at Ivybank, Exeter (20 beds). Smyrna, Torquay (16 beds), Castle Street, Barnstaple (7 beds), at the beginning of the year, and at the end of the year at Hawley, Barnstaple (20 beds). Whitecliffe, Torquay (40 beds) was not ready for occupation during the year. With the exception of 10 beds at Ivybank, all were used for ex-service men. There is still a large demand for hospital beds, especially for women.

(5) *Shelters.* At the suggestion of the Chairman of the Public Health Committee, 10 additional shelters at a cost of £119 10s. were provided, making 70 in all for distribution about the county. They are used for cases returning from a Sanatorium, or for isolating infectious cases at their homes, where the housing conditions are unfavourable.

(6) *Home Visiting and After Care.* Where Health Visitors are available and the Tuberculosis Officer requests their attendance, home visiting is done by these officials. There is no official "After Care Committee," but the Tuberculosis Officers make use of the clergy and philanthropic people where possible for suitable cases.

Nursing of Tuberculosis cases is undertaken by the nurses of the different district nursing associations, at a fee of 1s. per visit, not exceeding 10s. per week, when requested by the Tuberculosis Officer.

Dentistry and X-Rays are provided in suitable cases on the requisition of the Tuberculosis Officers.

No arrangements have yet been made with other local authorities for the treatment of surgical tuberculosis, in a special hospital common to joint councils. Patients who were unable to be accommodated in the County Council's own institutions have been sent to one of the following institutions:—Exmouth Seaside Home for Children (15 cases), Heather Tor Sanatorium for Children, Yelverton (10 cases), Lord Mayor Treloar's Hospital for Children, Alton (8 cases), Royal Sea Battery Hospital, Margate (3 cases), London Hospital for Finsen Light (one case), Didworthy

(one case), County Sanatorium, Southampton (one case), Winsley Sanatorium (3 cases), Whipton, Exeter (2 cases), St. Raphaels and Barnabas Home, Torquay (two cases).

TABLE IX.
DEATH RATES.

Districts.	Rates per 1,000 of population.									
	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Urban . . .	1.3	1.1	1.2	1.2	1.2	1.5	1.7	1.7	1.4	1.2
Rural . . .	1.1	0.9	1.1	1.0	1.1	1.1	1.3	1.3	1.2	1.0
Administrative County	1.2	1.0	1.1	1.1	1.1	1.3	1.5	1.6	1.3	1.1

VENEREAL DISEASES.

During 1920 there was no extension of facilities for treatment in the County, patients being accommodated only at Exeter and Plymouth. Progress was, however, made with a view of establishing a Clinic at the Tuberculosis Dispensary, 9 Castle Street, Barnstaple, to serve North Devon, but it was not opened until the beginning of this year. The difficulty in providing a Clinic at Torquay is nearly at an end. An Army hut has been purchased and the formal approval for its erection has been sanctioned by the Ministry of Health and the Torquay Borough Council.

During the year 222 new out-patients and 69 new in-patients were treated at the Royal Devon and Exeter Hospital, against 340 and 72 respectively for the year 1919, whilst 67 new out-patients and 10 new in-patients were treated at the South Devon and East Cornwall Hospital, Plymouth, against 58 and 10 patients for the previous year.

St. Mary's Home, Exeter, received 27 new patients during the year, and provided for a very important part of the scheme for the prevention of the spread of venereal diseases.

Up to the present only 9 (last year 6) medical practitioners have been placed on the list of those qualified to administer Salvarsan substitutes. To these, 299 supplies were sent, against 18 for the previous year.

During this year 1,147 (424 for the previous year) samples for pathological investigation have been submitted to the pathologists in Exeter and Plymouth, whilst 103 (64 for the previous year) outfits have been provided to medical practitioners in the County.

It has been found necessary to pay £173 11s. 3d. against £60 6s. 4d. for last year, to patients for travelling expenses to the nearest clinic in order that they might receive treatment. Without this provision the cases would go untreated to the detriment of their own health and those with whom they are brought in contact.

ISOLATION HOSPITALS.

There is nothing of importance to report in this connection, except that the proposed Isolation Hospital for East Devon, together with its pavilion for advanced cases of tuberculosis, has been abandoned for the time on account of economic conditions, and the site has been let for agricultural purposes.

The following table gives the details of the provision of hospital accommodation in the administrative county, and shows how badly it is serviced, especially in regard to any preparedness to meet outbreaks of small pox :—

Districts.	Hospital accommodation for Ordinary Infectious Diseases.	Hospital accommodation for Small-pox.
URBAN.		
Ashburton	Nil	Nil
Axminster	Nil	Nil
Bampton	Use of Tiverton Hospital	Nil
Barnstaple	Hospital (14 beds for three diseases)	Field & two tents acquired
Bideford	Hospital (9 beds for one disease) ..	Would use present Hospital
Brixham	Hospital (4 beds)	do. do.
Buckfastleigh	Nil	Nil

Budleigh Salterton	Use of Exeter Sanatorium	Nil
Crediton	do. do.	Wooden building
Dartmouth	Temporary (6 beds)	Would use present Hospital
Dawlish	Use of Exeter Sanatorium	Nil
Exmouth	do. do.	Bungalow
Holsworthy	Nil	Nil
Honiton	Nil	Cottage
Iltacombe	Hospital (22 beds)	Hospital (8 beds)
Ivybridge	Nil	Nil
Kingsbridge	Nil	Nil
Lynton	Hospital	Use present
Newton Abbot	Joint Hospital (with Rural, 26 beds)	Nil
Northam	Nil	Nil
Okehampton	Nil	Tent
Ottery St. Mary	Nil	Nil
Paignton	Hospital (6 beds)	Nil
Salcombe	Nil	Nil
Seaton	Nil	Nil
Sidmouth	Use of cottage and Exeter Sanatorium	Use cottage
South Molton	Nil	Tent
Tavistock	Nil	Nil
Teignmouth	Hospital (8 beds)	Nil
Tiverton	Joint Hospital (with Rural, 23 beds) ..	Acquired field for tents
Torrington	Nil	Nil
Torquay	Hospital (30 beds)	Hospital (8 beds)
Totnes	Nil	Nil
RURAL.		
Axminster	Nil	Nil
Barnstaple	Nil	Same as Urban
Bideford	Nil	Nil
Broadwood-widger	Nil	Nil
Crediton	Use of Exeter Sanatorium	Two cottages
Culmstock	Use of Tiverton Joint Hospital	Nil
Holsworthy	Nil	Nil
Honiton	Two cottages for 6 beds	Use present two cottages
Kingsbridge	Nil	Nil
Newton Abbot	Joint Hospital (with Urban, 26 beds)	Nil
Okehampton	Nil	Nil
Plympton St. Mary	Use of Plymouth Borough Hospital ..	Hospital (12 beds)
South Molton	Nil	Nil
St. Thomas	Use of Exeter Sanatorium	Nil
Tavistock	Nil	Nil
Tiverton	Joint Hospital (with Urban, 23 beds)	Field
Torrington	Nil	Nil
Totnes	Nil	Ground rented

CANCER.

During the year, 597 (urban 318, rural 279) deaths were registered from this disease against 551, 511, 583, 551 and 488 for the five preceding years; giving a death rate of 1.4 per 1,000 population, against 1.4, 1.3 and 1.5 for the three previous years. It will be observed that the death rate is the same as last year. No further evidence of the cause or satisfactory treatment of the disease has been forthcoming, although much research work has, and is, being carried out by both voluntary and State workers.

TABLE X.

DEATH RATES.

Districts.	Rates per 1,000 of population.									
	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919
Urban . . .	1.0	1.1	1.1	1.2	1.3	1.3	1.5	1.7	1.3	1.4
Rural . . .	0.9	1.0	1.0	0.9	1.0	1.0	1.3	1.4	1.3	1.3
Administrative County	1.0	1.1	1.2	1.0	1.1	1.1	1.4	1.5	1.3	1.4

SANITARY CIRCUMSTANCES.

Water Supply.

With a very few exceptions the urban districts are in all respects satisfactory in regard to the water supplies, but the same cannot be said of the rural areas, for nearly all, with the exception of the villages in the Newton Abbot and Plympton St. Mary areas depend on wells, the water from which must be very often unsatisfactory in regard to quantity, quality and distribution, and it is necessary, therefore, to persist in the remarks contained in my

previous Annual Reports : “ Until sanitary authorities realise that
 “ an abundant supply of wholesome water for drinking and domestic
 “ purposes is necessary for health and cleanliness, they have failed
 “ to carry out the most important duty laid on them both in
 “ regard to moral and statutory requirements, and no medical
 “ officer of health should rest satisfied until he sees every house
 “ in his district so provided. The present-day water engineer is
 “ able by means of rams, oil engine pumps, and other means, to
 “ overcome all the physical disabilities that existed in bygone
 “ days.”

The following list of places in the County are without a satisfactory water supply :

Axminster, R.	Hawkchurch, Chardstock, Stockland, Musbury, Kilmington.
Bampton, U.	Deficient service.
Barnstaple, R.	Combemartin.
Bideford, U.	Increased supply required.
Crediton, R.	Morchard Bishop, Cheriton Fitzpaine.
Culmstock, R.	Many wells liable to pollution.
Dartmouth, U.	Unsatisfactory.
Holsworthy, R.	Black Torrington.
Honiton, R.	Salcombe Regis.
Kingsbridge, R.	Aveton Giffard, Marlborough, Modbury.
Lynton, U.	Improved storage, etc., required.
Newton Abbot, R.	Ilsington, Hennock, Broadhempston.
Newton Abbot, U.	Mile End Cottages.
Okehampton, R.	Chagford, North Tawton, Northlew, Drewsteignton, Iddesleigh.
Ottery St. Mary, U.	Tipton St. John.
St. Thomas, R.	Lympstone.
South Molton, R.	Rackenford, North Molton, Bishopsnympton.
Tavistock, R.	Lifton, Stowford, Bere Alston, Sheepstor, Whitchurch, Walkhampton, Buckland Monachorum, Milton Coombe.

RIVERS AND STREAMS

The rivers and streams in the county do not suffer from serious pollution to the extent that exists in large manufacturing districts. The chief causes are the effluents from sewage works or direct sewage from villages or separate houses, and the trade effluent from paper mills, tan-yards, cheese and butter factories and tin mines.

DRAINAGE AND SEWERAGE.

Sanitary authorities of the urban and rural areas have made good progress in providing the towns and large villages with drainage schemes, but in many of the rural areas they are incomplete on account of the unsatisfactory water supply for flushing purposes. In most of the rural areas much neglect is evident in the non-provision of a proper gully and slop drain for separate cottages.

The following places have an unsatisfactory condition of sewerage :—

Axminster, R.	Colyton, Chardstock, Musbury, Axmouth, Stockland.
Barnstaple, R.	Landkey, Bishops Tawton.
Barnstaple, U.	Unsatisfactory outfall.
Crediton, U.	Fordton.
Holsworthy, U.	Unsatisfactory.
Honiton, R.	Feniton.
Honiton, U.	New outfall works required. Railway goods yard.
Kingsbridge, R.	Modbury.
Northam, U.	Westward Ho !, Northam, Appledore.
Okehampton, R.	South Zeal, Spreyton, Bridestowe.
Ottery St. Mary, U.	Tipton St. John.
Plympton St. Mary, R.	Elburton, Roborough.

Salcombe, U.	Unsatisfactory discharge.
Seaton, U.	Extension of outfall required.
South Molton, R.	East Knowstone.
Tavistock, R.	Lifton, Walkhampton, Buckland Monachorum, Milton Coombe, Clearbrook, Dousland, Bere Ferrers, Whitchurch, Meavy, Bere Alston.
Tiverton, R.	Uffculme, Cullompton.
Totnes, R.	Harbertonford, Churston Ferrers, Galmpton.
Teignmouth, U.	Dawlish road new sewer required.

CLOSET ACCOMMODATION.

In some of the urban districts unsatisfactory pans and hand flushing arrangements are still to be found, and without the provision of a separate closet for each house. In the rural areas privy middens can still be found, and where earth closets (with a bucket under a wooden seat) are provided there is generally an absence of any receptacle for dried earth, with the result that the bucket contains a foul accumulation. In many cases also one closet has to provide for two or more houses.

SCAVENGING.

Much neglect of this very important matter (owing to the close connection between this and fly borne diseases) is evident in both urban and rural areas. In the former from want of proper receptacles for storage until the scavenger calls, and in the latter from want of receptacles and the accumulation near dwellings for long periods of heaps of filth with all its dangers. This particularly applies to farm houses where large collections of manure are found near shippons and dairies. In this connection much neglect in the proper paving of yards is to be found in both urban and rural areas. In many cases it would make all the difference between a sanitary and insanitary dwelling. To witness the

beneficial effects of satisfactory paving a visit to the well cared for rural district of Newton Abbot would be a wholesome lesson to many a sanitary official.

SCHOOLS..

Although the sanitary condition of the schools is reported on from time to time by the school medical inspectors it must be remembered that these officials possess no statutory duties in regard to them, and it therefore behoves the officials of the sanitary authorities to exercise more supervision over them than over the ordinary dwelling, for then many cases of insanitary closets and urinals, absence of water supply, dampness of walls and insufficient ventilation would be remedied, and the prompt prevention of the spread of infectious diseases carried out. There have been instances of the outbreak of serious infectious diseases in villages in which the medical officer of health has never visited the school—the source of the trouble.

FOOD.

Milk Supply. Although celebrated for its milk and cream due to the excellency of its cattle and pasture, this county cannot boast of yielding a clean supply, on account of the absence in many cases of facilities for doing so, both in regard to insanitary cow-houses, means of cleaning milk utensils, and methods of storage and distribution. A great deal of milk is exported or used for making cheese, butter, and now dried milk with the result that many children in the rural areas have to go without, and drink, in its place, a pernicious mixture of tea.

An urgent need for improved legislation is required in order to get a clean and tubercle-free milk, as the powers under the the Dairies, Cowsheds and Milkshop Orders are made little use of in many areas.

Milk and Cream Regulations, 1912-1917. During the year

2 samples of cream, and 225 samples of milk were submitted by the police to the County Analyst in London. In no case was any preservative found.

Milk (Mothers and Children) Order, 1919. This has been administered by the Maternity and Child Welfare Committee, To the Health Visitors was entrusted the making of applications based on a scale for necessitous cases, which consisted of a free supply when the family income from all sources did not exceed seven shillings per head and when over seven shillings per head and under nine shillings it was supplied at half price.

The applications were considered by the District Medical Officers supervising Maternity centres, and, where approved, the milk was supplied by the Centre Committee of the District Sanitary Authority, in other cases the County Medical Officer considered each application and the milk was supplied by the County Council through the agency of the Health Visitor. During the year 619 (new and renewals) were supplied with milk for varying periods from one to six months at a cost of £1067 7s. 6d.

Other Foods. Some supervision is exercised by the district sanitary officials, but in many rural areas, on account of the large size and insufficient staff, it is impossible to carry out the work satisfactorily, especially in regard to the inspection of private slaughter houses. The sanitary conditions of many bakehouses are far from satisfactory on account of the water supply and structural defect

FOOD AND DRUGS ACT.

The following table gives details of the specimens submitted to the County Analyst for the year :

Article.	No. of Samples		No. of Adulterations		No. of Prosecutions		Amount of Fines
	1919	1920	1919	1920	1919	1920	1920
Arrowroot	2	1	..	..	..	..	..
Baking Powder ..	26	20	..	..	..	..	..
Bread	4	9	..	..	..	..	..
Butter	7	51	..	..	..	..	..
Cheese	7	12	..	..	..	..	..
Cider	1	..	..	..	..	..	..
Coffee and Chicory ..	16	20	..	..	..	..	..
Cornflour	2	..	..	..	..	..	..
Cocoa	7	7	..	..	..	..	..
Cream	2	2	..	..	..	..	..
Custard Powder ..	..	1	..	..	..	..	..
Egg Powder	3	2	..	..	..	..	..
Flour	11	15	..	..	..	..	..
Ginger	7	2	..	..	..	..	..
Jam	2	1	..	..	..	..	..
Lard	10	3	..	..	..	..	..
Marmalade	1	..	..	..	..	..	..
Margarine	11	31	..	..	..	..	..
Milk	304	221	19	13	8	13	Fines varying from 4s. to £4
Pearl Barley .. ..	..	1	..	..	..	..
Milk Skim .. ..	..	2	..	..	..	..
Tumeric .. ..	..	3	..	..	..	..
Golden Syrup .. ..	..	1	..	..	..	..	..
Mustard	6	3	..	..	..	..	..
Oatmeal	6	6	..	..	..	..	..
Pepper	30	32	..	..	..	..	..
Rice	7	8	..	..	..	..	..
Sago	1	2	..	..	..	..	..
Self-Raising Flour ..	10	7	..	..	..	..	..
Spirits and Beer ..	13	12	..	1	..	1	..
Semolina .. ..	..	..	..	..	..	..	..
Sugar	13	12	..	..	..	..	..
Sweets	7	6	..	..	..	..	..
Tea	24	25	..	..	..	..	..
Tapioca	6	5	..	..	..	..	..
Vinegar	4	2	..	..	..	..	..
Total No. of Samples taken	545	525	19	14	8	14	

MATERNITY AND CHILD WELFARE.

In my last Annual Report was given all the information required by the Ministry of Health in regard to the Inspection of Midwives, the number and work of the Health Visitors, a description of the midwifery service, the work of the maternity centres, and the available hospital accommodation (Maternity and Children) in the County.

INSPECTOR OF MIDWIVES AND CHIEF HEALTH VISITOR'S REPORT FOR 1920.

(MIDWIVES' ACT, 1902.)

Two hundred and eighty Midwives have notified their intention to practise against two hundred and sixty-six for 1919.

			1920.	1919.
Trained	..	..	226	208
Untrained	..	..	54	58
			<hr/>	<hr/>
			280	266

Inspections.

1. During the twelve months ending December 31st, 872 visits have been paid to Midwives. Of these Midwives 656 were trained and 216 untrained. Sixty-two special visits have been paid.

2. One untrained midwife was reported to the Central Midwives' Board for not complying with the Rules of that Body. The Board ordered her name to be removed from the Roll.

3. Two untrained Midwives resigned owing to failing health.

4. *Puerperal Sepsis.*

Of the fourteen cases (urban 6, rural 8) with three fatal results, which have been reported in the County against fourteen for 1919, seven cases occurred in the practice of medical men, the patients were nursed by trained nurses. These were all complicated cases, and three ended fatally. One case was attended by a medical practitioner and untrained nurse. This patient recovered. Four cases occurred in the practice of trained midwives who early sought medical aid for abnormal symptoms. In each instance the patients

made good recovery. Two cases were attended by untrained midwives, in one of these the midwife early sent for medical aid, and in the second case, the midwife did not recognise the symptoms early, and the doctor was not called in until after the 5th day. Both these patients recovered.

5. *Ophthalmia Neonatorum.*

Thirty-nine cases (urban 18, rural 21) were reported, against twenty-eight for the previous year. Eighteen of these occurred in the practice of medical men and twenty-one in the practice of trained midwives. All the mothers had ante-natal symptoms. In one case the infant lost the sight of both eyes.

6. *Central Midwives' Board. (Notifications.)*

The following notifications were received :—

	1920.	1919.
Requisitions for medical aid ..	555	326
Stillbirths	75	66
Laying out dead bodies ..	71	73
Contact with infection	29	22
Death of mother	4	1
Death of child	8	1
Artificial feeding	79	55
	—	—
	821	544
	—	—

7. *Midwifery Service.*

Five midwives notified their intention to practice in newly formed districts. :—

1. West Alvington and Thurlestone.
2. Plymstock, Lower Hooe, Oreston, Wembury and Hamlets.
3. Bishops Tawton.
4. Shaldon and Ringmore.
5. Appledore.

There are now 80 parishes with a population of 26,352 without a satisfactory midwifery service, against 85 parishes with a population of 35,482 for the previous year.

NOTIFICATION OF BIRTHS' ACT, 1907, 1915.

I. *Births.*

During the twelve months 6,791 births were notified.

	1920.	1919.
Notified by medical practitioners ..	3321	2419
Notified by midwives	3433	2241
Notified by parents	12	8
Notified by women acting in emergency midwifery	25	37
	<hr/>	<hr/>
Total	6791	4705
	<hr/>	<hr/>
Not notified, but obtained from the Registrar's Returns	599	429
	<hr/>	<hr/>
Total	7390	5134
	<hr/>	<hr/>

2. *Stillbirths.*

Two hundred and seventy-eight stillbirths were notified during the year.

	1920.	1919.
Notified by medical practitioners	186	125
Notified by midwives	92	85
	<hr/>	<hr/>
Total	278	210
	<hr/>	<hr/>

In all cases attended by medical men a letter was addressed to the doctor suggesting the application of a Wasserman test. In seven cases this was considered advisable. In the trained midwives' cases, special enquiries are made by the health visiting staff, and where it is thought necessary, medical advice is suggested. Where cases occur in the practice of untrained midwives the midwife is asked to call in medical aid.

Health Visitors.

The approved staff of health visitors for the year was 22, but

this number was not always available. The following is a summary of visits paid by them.

	1920	1919
First visits to infants under 1 year	5460	4542
Re-visits	14325	8912
Firsts visits to expectant mothers	692	491
Re-visits	789	512
Visits to children (1 - 5 years.) ..	2602	1037
	<hr/>	<hr/>
Total	23868	15,494

Holsworthy, urban and rural, Broadwoodwidge, South Molton rural, part Barnstaple rural, Bideford and Torrington rural, and Tiverton rural areas were without Health Visitors for several months during the year.

The work of Health Visiting was again handicapped on account of an insufficient staff. In the districts where health visiting has been in operation for three years, good results are being obtained

6. *Maternity Centres.*

When the year commenced, nine centres were being carried on by the Urban District Councils in conjunction with the County Council. At the end of the year Exmouth and Crediton centres were established and Ottery St. Mary came under the authority of the Urban District Council and co-operation of the County Council.

Maternity Centres.		No. of openings.				Mothers present.				
		Pop.	Mar.	June.	Sep.	Dec.	Mar.	June.	Sep.	Dec.
Barnstaple	..	14270	8	12	10	11	262	251	192	379
Bideford	..	9818	10	11	10	11	228	269	229	454
Brixham	..	7841	11	13	9	5	306	266	197	165
Crediton	..	3452	..	..	5	11	..	..	84	124
Dartmouth	..	7046	7	8	9	11	159	157	172	238
Exmouth	..	13470	..	..	..	8	.	..	..	107
Ilfracombe	..	8440	12	12	7	11	204	141	74	273
Newton Abbot		13879	12	12	10	12	237	151	163	198
Ottery S. Mary		3591	12	4	10	11	33	17	66	57
Paignton	..	13091	12	11	7	12	285	324	202	419
Seaton	..	1818		Voluntary.						
Sidmouth	..	5576		Voluntary.						
Tavistock	..	4206		Voluntary.						
Tiverton	..	9452	12	12	3	12	206	108	45	114
Totnes	..	3730	14	10	8	11	78	51	27	57
Totals		119,680	110	105	88	126	1998	1735	1451	2385

Maternity Centres.	Infants present.					Children 1—5 years.			
	Pop.	Mar.	June.	Sep.	Dec.	Mar.	June	Sep.	Dec.
Barnstaple ..	14270	265	239	188	362	47	42	26	61
Bideford ..	9818	288	205	217	437	20	18	20	56
Brixham ..	7841	280	244	201	164	55	69	27	33
Crediton ..	3452	..	..	66	76	...	..	28	83
Dartmouth ..	7046	157	155	145	162	27	39	45	88
Exmouth ..	13470	..	..	..	101	..	..	..	24
Ilfracombe ..	8440	109	82	48	90	101	61	15	105
Newton Abbot	13879	131	75	97	119	131	91	81	117
Ottery S. Mary	3591	18	6	42	43	16	12	3	14
Paignton ..	13091	215	262	168	327	54	77	35	113
Seaton ..	1818	Voluntary.							
Sidmouth ..	5576	Voluntary.							
Tavistock ..	4206	Voluntary.							
Tiverton ..	9452	146	136	19	108	86	94	29	44
Totnes ..	3730	41	22	5	20	55	45	29	12
Totals	119,680	1654	1486	1196	2009	592	548	338	749

The above figures, showing increased attendances, prove that the centres are appreciated by the mothers. The number of expectant mothers attending the centres has also increased.

A course of talks and demonstrations on hygiene, cookery and needlework have been given at Brixham, Bideford, Dartmouth, Newton Abbot and Paignton by the Domestic Science Teachers. It is hoped that in the near future other centres will be provided with such instruction.

The needlework and knitting classes which are held at several of the centres are still doing good work.

A great deal of time and travelling is entailed by the Chief Health Visitor for the supervision of the work of Health Visitors, Maternity Centres and School Clinics.

5. *Milk (Mothers and Children's) Order, 1919.*

Two hundred and eighty-seven new cases and three hundred and thirty-two renewals were applied for to the county medical officer for the supply of milk under the above Order, against three hundred and twenty-three and one hundred and thirty-four respectively in 1919. Forty-seven applications were not granted against forty-seven for the previous year. One application was made for a certificate only, and fifty-two mothers paid half the cost of the milk granted to them. The amount of milk supplied by the County Council was 47,288 pints.

HOUSING ACCOMODATION.

In the last Report it was stated that the country had awakened to the deplorable condition of the housing condition of the working classes, brought about by the neglect, for many years, of sanitary authorities and their officers to carry out their statutory duties. The Government was evidently in earnest for removing this blot on our civilisation, which is at the root of many of our social and disease conditions. Every inducement, at the cost of the Exchequer and by legislation, was made for Sanitary Authorities to provide new houses, and it is hoped that in about two years better conditions will prevail. The position of county councils in this matter is almost nil, although they are now constituted executive bodies for dealing with many of the diseases caused mainly by bad housing. Under the present Housing Act it is now possible for them to stimulate the district councils into greater activity, especially in regard to making existing houses "in all respects" fit for human habitation. According to the returns furnished to the Housing Commissioner for the district by the clerks of the urban and rural districts in the administrative county, 1,758 new houses were required in the urban areas, and 3,002 in the rural areas, making a total of 4,660. As far as can be ascertained from the reports of the Medical Officers of Health, 274 houses are in course of construction, and 29 have been completed in the urban districts, whilst 306 are being constructed and 81 are finished in the rural districts, giving a total of 577 houses under construction and 111 completed and occupied.

MENTAL DEFICIENCY.

During 1920, cases of mental deficiency have been dealt with as follows :

Certificated for Institutions or Guardianships (Adults)	32
Ineducable children	45
(38 Imbeciles and 7 idiots.)	
Examined, but not found defective	12
Moral defectives	3
Insane	1
	—
Total	93

Those cases in Institutions are being scrutinised with the idea of allocating them as suitably as possible, rather than allowing them to remain indefinitely in surroundings incapable of improvement to their needs.

The opening of the Extension to the Western Counties' Institution at Starcross offers great possibilities, of which the fullest use will be made.

The number of inmates at Stoke Lyne have largely increased, and some 30 lower grade defectives are now provided for there. There is still pressing need for suitable accommodation in our County for defective epileptics and helpless cases, and the committee is endeavouring to arrange for these at Barnstaple. This, when accomplished, will fill a great gap, but it is to be wished that an entire union, nearer to Exeter, could have been acquired, where, as a sorting house, all classes of defectives could have been dealt with under closer and more constant attention.

The voluntary association for the care of the feeble-minded has rendered the greatest help in its untiring activity in the cause.

PORT DISTRICTS.

Barnstaple.—The Medical Officer reported that there were no cases of sickness or mortality on shipboard in the district.

The Inspector visited nine foreign ships, and dealt with rats on one vessel.

As a temporary measure the Charlotte was fitted as a Hospital Ship with 3 beds, and placed alongside the Nynoplin. The nursing staff to be accommodated for sleeping on the latter.

Dartmouth and Totnes.—During the year there was a great increase in the number of vessels entering the port: 708 ships being inspected, against 461 for the previous year. The Medical Officer visited 596 ships for various kinds of illness, a large number being cases of venereal diseases. One ship arrived with 8 cases of enteric, the worst cases had to be landed and sent to different hospitals. The accommodation for these cases, which do not usually come singly, is very unsatisfactory.

Exeter.—During the year 93 vessels with a tonnage of 6,979, against 60 vessels with a tonnage of 3,474 arrived at the port. No sickness or mortality occurred on any, and the sanitary condition of the vessels was good.

The hospital ship is, in the opinion of the Medical Officer of Health, no longer fit to receive patients, and an efficient substitute should be provided.

Kingsbridge and Salcombe.—The Medical Officer reports another satisfactory year.

There was one case of tuberculosis reported on the ships inspected, and the amount of shipping entering the port has again increased.

Plymouth.—During the year 1,879 vessels, against 1,561 and 1,432 for the two previous years, were inspected by the sanitary officials. Of these 202, against 154 for the previous year, were examined by the Medical Officer. 138 vessels carrying 36,663 crew, and 61,123 passengers arrived from plague and cholera infected areas. There were 898 cases of sickness and 83 deaths investigated, against 3,492 and 114 respectively for the previous year. Of the former, 5 were removed to the Borough Hospitals, Mount Gold, or to the hospital ships in the Sound, and 31 were removed to local institutions.

Two cases of small-pox arrived in the port, and both were discharged convalescent.

The usual sanitary precautions in dealing with these different diseases were carried out in Plymouth.

In 133 of the vessels inspected there were 663 sanitary defects which were, in the majority of cases, remedied before the vessels left the port.

During the year 6,017 tons of food stuffs were passed unfit for food, and condemned. The chief items were 5,962 tons of maize, and 50 tons of apples.

Teignmouth.—The Sanitary Inspector reports that 108 vessels were inspected, of which 45 were foreign. Notices were served to remedy 10 defects.

No report was received from the Medical Officer of Health.

BACTERIOLOGY.

The following tables give details of the specimens submitted during the year :—

URBAN.

DISTRICTS.	DIPHTHERIA		TYPHOID.		TUBER- CULOSIS.		TOTALS.
	Posi- tive.	Nega- tive.	Posi- tive.	Nega- tive.	Posi- tive.	Nega- tive.	
Ashburton	1	1	..	..	..	2	4
Axminster	2	1	..	..	2	2	7
Bampton	1	..	..	..	3	6	10
Barnstaple	17	53	..	1	17	101	189
Bideford	92	177	1	2	14	94	380
Brixham	20	27	..	..	3	24	74
Buckfastleigh ..	3	12	..	..	4	10	29
Budleigh Salterton ..	2	2	..	..	2	6	12
Crediton	7	12	..	..	3	11	33
Dartmouth	36	120	1	..	5	17	179
Dawlish	2	15	..	..	4	6	27
Exmouth .. ..	..	7	..	..	8	27	42
Holsworthy .. ..	..	1	..	1	2	..	4
Honiton	1	5	..	..	3	7	16
Ilfracombe .. ..	..	8	..	..	7	21	36
Ivybridge	1	1	..	..	..	4	6
Kingsbridge	1	5	..	..	2	2	10
Lynton	11	18	..	..	2	5	36
Newton Abbot	109	412	..	..	9	38	568
Northam	16	35	..	..	..	16	67
Okehampton	5	19	..	..	1	13	38
Ottery St. Mary	2	6	1	3	3	24	39
Paignton	28	58	..	..	4	33	123
Salcombe .. ..	..	6	..	..	4	15	25
Seaton .. ..	..	8	..	..	2	5	15
Sidmouth	1	15	..	..	4	12	32
South Molton	14	25	..	..	3	10	52
Tavistock	1	4	..	..	1	4	10
Teignmouth	42	143	..	3	6	24	218
Tiverton	6	49	..	..	10	49	114
Torrington	2	11	..	..	5	28	46
Torquay .. ..	..	4	..	..	4	37	45
Totnes	3	4	..	..	..	4	11
	426	1264	3	10	137	657	2497

RURAL.

DISTRICTS.	DIPHTHERIA.		TYPHOID.		TUBER- CULOSIS.		TOTALS.
	Posi- tive.	Nega- tive.	Posi- tive.	Nega- tive.	Posi- tive.	Nega- tive.	
Axminster ..	..	2	..	..	7	12	21
Barnstaple ..	10	28	..	1	9	45	93
Bideford ..	37	63	..	1	4	12	117
Broadwoodwidge ..	6	5	..	..	3	4	18
Crediton ..	8	12	..	..	4	14	38
Culmstock ..	..	3	..	..	..	4	7
Holsworthy ..	9	28	..	..	5	11	53
Honiton ..	10	14	..	..	2	9	35
Kingsbridge ..	3	15	..	1	4	23	46
Newton Abbot ..	31	100	1	3	8	23	166
Okehampton ..	46	80	..	4	5	23	158
Plympton St. Mary ..	17	63	..	..	7	23	110
South Molton ..	47	71	..	..	7	17	142
St. Thomas ..	66	104	..	10	16	67	263
Tavistock ..	3	4	..	..	2	10	19
Tiverton ..	3	15	..	..	9	40	67
Torrington ..	6	19	..	1	6	21	53
Totnes ..	4	25	..	..	3	6	38
	306	651	1	21	101	364	1444

TOTAL NUMBER OF SPECIMENS, WITH RESULTS.

DISTRICTS.	DIPHTHERIA.		TYPHOID.		TUBER- CULOSIS.		TOTALS.
	Posi- tive.	Nega- tive.	Posi- tive.	Nega- tive.	Posi- tive.	Nega- tive.	
URBAN ..	426	1264	3	10	137	657	2497
RURAL ..	306	651	1	21	101	364	1444
" IVYBANK " (Disp.)	..	..	..	..	2	1	3
BARNSTAPLE (Dis- pensary) ..	..	..	..	..	1	2	3
" HAWKMOOR " (San.)	..	2	..	..	6	12	20
" SMYRNA," Torquay (Dispensary)	..	..	..	..	..	1	1
TOTALS ..	731	1917	4	31	247	1037	3968

METEOROLOGY.

Conspicuous occurrences of the weather of 1920 were the wet spring, the rain and low temperature of July and August, the damp and misty September, the brilliancy of October, the wintry spell during the second week of December, and the abnormally mild weather which set in just before Christmas.

The number of rainy days exceeded those of 1919 by eleven, the rainfall was 2.4 more inches, the mean temperature and the daily mean sunshine hours were both below those of the previous year.

The following table taken from the Annual Report of the Meteorological Committee gives the main particulars of the weather in the Administrative County.

District.	No. of Rainy days.	No. of Foggy days.	Rainfall in inches.	Mean tempera- ture.	Daily mean sunshine in hours.
N. (Ilfracombe) . .	213	24	43.6	52.1	3.8
E. (Rousdon) . .	174	112	32.7	49.3	3.9
S. (Torquay) . .	188	6	33.5	52.4	4.3
W. (Tavistock) . .	230	70	55.9	50.0	..
S.W. England . .	203	..	40.7	53.0	3.6

GENERAL TABLE XI.

RATES PER 1,000 POPULATION.

District.	Popula- tion. (Esti- mated.) for Birth Rate	Births.		Popula- tion (Esti- mated) for Death Rate.	Deaths.		Principal In- fectious Diseases Deaths.		Tuberculosis Deaths.		Cancer Deaths.		Infant Mortality. Rate per 1000 births.	
		No.	Rate.		No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.
URBAN.														
Ashburton ..	2419	63	26.0	2419	42	17.3	1	0.4	3	1.2	2	0.8	3	47
Axminster ..	2462	35	14.2	2462	20	8.1	..	..	3	1.2	3	1.2	1	28
Bampton ..	1442	32	22.1	1442	29	20.1	..	..	2	1.3	3	2.0	4	125
Barnstaple ..	14270	304	25.5	14270	195	13.6	2	0.1	33	2.3	19	1.3	16	43
Bideford ..	9818	200	20.3	9818	129	13.1	9	0.9	14	1.4	11	1.1	12	60
Brixham ..	7841	219	27.9	7841	119	15.1	5	0.6	9	1.1	5	0.6	17	77
Buckfastleigh ..	2272	42	18.4	2272	20	8.8	..	..	1	0.4	3	1.3	3	71
Budleigh Saltr'tn	2522	32	12.6	2522	29	11.4	..	..	5	1.9	1	0.3	..	..
Crediton ..	3452	76	22.0	3452	53	15.3	1	0.2	4	1.1	7	2.0	7	92
Dartmouth ..	7046	146	20.7	6373	68	10.6	5	0.7	3	0.4	14	2.1	8	54
Dawlish ..	4427	93	21.0	4427	40	9.0	..	..	5	1.1	5	1.1	2	21
Exmouth ..	13470	214	15.8	13364	186	13.9	1	0.07	20	1.4	27	2.0	12	56
Great Torrington	3284	82	24.9	3284	51	15.5	..	..	5	1.5	8	2.4	5	60.9
Holsworthy ..	1540	33	21.4	1540	14	9.0	..	..	2	1.2	..	..	2	60
Honiton ..	2859	67	23.4	2859	35	12.2	3	1.0	4	1.3	1	0.3	5	74
Ilfracombe ..	8440	137	16.2	8440	115	13.6	2	0.2	16	1.8	15	1.7	6	43
Ivybridge ..	1614	36	22.3	1614	21	13.0	..	..	1	0.6	3	1.8	2	55
Kingsbridge ..	3044	55	18.0	3044	46	15.1	3	0.9	1	0.3	4	1.3	3	54
Lynton ..	1554	34	21.8	1554	14	9.0	1	0.6	1	0.6	1	0.6	3	88
Newton Abbot ..	13879	305	21.9	13775	174	12.6	10	0.7	18	1.3	15	1.0	11	..
Northam ..	5527	119	21.5	5527	72	13.0	2	0.3	4	0.7	11	1.9	4	33
Okehampton ..	3445	82	23.8	3445	51	14.8	..	..	4	1.1	3	0.8	5	60
Ottery St. Mary..	3591	72	20.0	3591	44	12.2	..	..	8	2.2	3	0.8	3	41
Paignton ..	13091	240	18.3	12981	170	13.0	4	0.3	18	1.3	21	1.6	15	62
Salcombe ..	1941	37	19.0	1941	20	10.3	..	..	3	1.5	..	..	..	..
Seaton ..	1818	39	21.4	1818	27	14.8	..	..	2	1.1	4	2.2	1	25
Sidmouth ..	5576	95	17.0	5576	68	12.1	4	0.7	2	0.3	9	1.6	5	52
South Molton ..	2876	61	21.2	2876	30	10.4	..	..	1	0.3	2	0.6	2	32
Tavistock ..	4206	69	16.4	4206	68	16.1	..	..	4	0.9	10	2.3	9	130
Teignmouth ..	9255	172	18.5	9153	127	13.8	3	0.3	9	0.9	22	2.4	6	34
Tiverton ..	9452	217	22.9	9452	114	12.0	4	0.4	11	1.1	0	0.6	16	73
Torquay ..	35156	657	18.6	34703	510	14.6	7	0.2	45	1.2	72	2.4	34	51
Totnes ..	3730	77	20.6	3730	49	13.1	5	1.3	2	0.5	8	2.1	4	51
URBAN ..	207319	4202	20.2	205771	2750	13.3	72	0.3	263	1.2	318	1.5	226	53
RURAL.														
Axminster ..	8595	205	23.8	8595	117	13.6	..	..	13	1.5	16	1.8	5	24
Barnstaple ..	17551	392	22.3	17551	194	11.1	1	0.5	21	1.1	17	0.9	12	30
Bideford ..	6019	127	21.09	6019	54	8.9	..	..	2	0.3	6	0.9	2	15
Broadwoodwidge	2220	54	24.3	2220	22	9.9	..	..	1	0.4	1	0.4	1	18
Crediton ..	9906	216	21.8	9906	149	15.0	4	0.4	17	1.7	13	1.3	14	64
Culmstock ..	2685	72	26.8	2686	40	14.8	..	..	4	1.4	1	0.3	3	41
Holsworthy ..	6600	140	21.2	6600	92	13.9	3	0.4	8	1.2	14	2.1	9	64
Honiton ..	8621	178	20.6	8621	107	12.4	2	0.2	5	0.5	14	1.6	12	67
Kingsbridge ..	11750	234	19.9	11750	135	11.4	..	..	13	1.1	11	0.9	12	51
Newton Abbot ..	18066	437	24.1	18066	235	13.0	3	0.1	20	1.1	29	1.6	20	45
Okehampton ..	12313	273	22.1	12053	173	14.3	5	0.4	6	0.4	18	1.4	15	54
Plymouth St.Mary	20383	461	22.6	18623	242	12.9	12	0.6	24	1.2	23	1.2	30	65
St. Thomas ..	23687	546	23.0	23687	316	13.3	4	0.1	33	1.3	37	1.5	31	50
South Molton ..	9771	218	22.3	9771	122	12.4	1	0.1	7	0.7	12	1.2	11	50
Tavistock ..	14047	315	22.4	14047	146	10.3	1	0.07	7	0.4	24	1.6	7	22
Tiverton ..	14178	312	22.0	14178	150	10.5	..	..	11	0.7	17	1.1	12	38
Torrington ..	6540	180	27.5	6540	118	18.0	5	0.7	12	1.8	15	2.2	8	44
Totnes ..	11259	230	20.4	11259	130	11.5	2	0.1	12	1.0	11	0.9	18	78
RURAL ..	204192	4590	22.4	202172	2542	12.5	43	0.2	216	1.0	279	1.3	222	48
ADMINISTRATIVE														
COUNTY ..	411511	8792	21.3	407943	5292	12.9	115	0.2	479	1.1	597	1.4	448	50.9

TABLE XII
CAUSES OF DEATH IN EACH DISTRICT DURING THE YEAR 1920.

DISTRICTS.		All causes.	Enteric Fever.	Small Pox.	Measles.	Scarlet Fever	Whooping Cough.	Diphtheria and Croup.	Influenza.	Erysipelas.	Pulmonary Tuberculosis.	Tuberculous Meningitis.	Other Tuberculous Diseases.	Cancer.	Rheumatic Fever.	Meningitis.	Organic Heart Disease.	Bronchitis.	Pneumonia.	Other Respiratory Diseases.	Diarrhoea.	Appendicitis.	Cirrhosis of Liver.	Alcoholism.	Nephritis and Bright's Disease.	Puerperal Fever.	Parturition, apart from Puerperal Fever.	Congenital Debility.	Violence, apart from Suicide.	Suicide.	Other Defined Diseases.	Causes ill-defined or unknown.	Special causes already included.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
																																	Cerebro-Spinal.	Encephalitis Lethargica	Anthrax																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
URBAN.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											</

TABLE XIII.
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE
ADMINISTRATIVE COUNTY OF DEVON, 1920.

CAUSES OF DEATH.	SEX.	AGGREGATE OF URBAN DISTRICTS.									AGGREGATE OF RURAL DISTRICTS.								
		All Ages.	0—	1—	2—	5—	15—	25—	45—	65—	All Ages.	0—	1—	2—	5—	15—	25—	45—	65—
ALL CAUSES	M. F.	1300 1450	127 99	13 12	25 15	53 47	55 45	114 160	308 295	605 777	1259 1283	121 101	14 13	13 21	32 42	39 55	125 120	295 250	620 681
1 Enteric Fever	M. F.	2 3	.. ..	.. ..	.. ..	.. ..	1 1	.. 2	.. ..	1..	....	....	....	....	....	....	....	....	....
2 Small-pox	M. F.	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..
3 Measles	M. F.	4 6	.. 3	2 1	1 1	1 1	.. ..	.. ..	.. ..	.. ..	2 2	1 ..	.. 1	.. 1	1..	....	....	....	....
4 Scarlet Fever	M. F.	1 2	.. ..	.. ..	.. ..	.. 2	1 ..	.. ..	.. ..	.. ..	1 2	.. ..	1 ..	.. 1	.. 1	....	....	....	....
5 Whooping cough	M. F.	3 7	2 4	1 1	.. 1	.. 1	.. ..	.. ..	.. ..	.. ..	7 6	6 4	.. 2	2 ..	1..	....	....	....	....
6 Diphtheria and croup	M. F.	23 18	1 ..	1 ..	7 6	14 10	.. 1	.. ..	.. 1	.. ..	3 14	.. 1	.. ..	.. 4	2 7	1 2	....	....	....
7 Influenza	M. F.	28 24	1 ..	1 1	2 ..	2 1	1 2	5 5	5 6	11 9	27 21	1 2	.. ..	.. ..	.. ..	1 ..	4 6	11 3	10 7
8 Erysipelas	M. F.	.. 3	.. ..	.. ..	.. ..	.. ..	.. ..	.. 1	.. ..	.. 2	3 ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	2 ..	1 ..
9 Pulmonary Tuberculosis	M. F.	108 116	.. ..	.. ..	.. ..	2 1	27 29	40 54	34 27	5 5	79 93	.. ..	.. ..	.. ..	1 6	13 23	42 36	17 18	6 10
10 Tuberculous Meningitis	M. F.	8 5	.. ..	.. 1	1 ..	5 2	.. 1	1 1	.. ..	.. ..	3 7	.. 2	1 ..	1 1	2 2	2 2	....	....	....
11 Other tuberculous diseases	M. F.	7 19	1 1	1 ..	.. ..	1 3	1 2	3 4	.. 4	.. 5	19 15	1 1	2 ..	1 1	2 2	2 4	9 2	1 3	1 2
12 Cancer, malignant disease	M. F.	131 187	.. ..	.. 1	.. ..	.. ..	.. 1	8 11	51 81	72 93	134 145	.. ..	.. ..	1 ..	.. ..	1 ..	5 9	50 56	77 80
13 Rheumatic Fever	M. F.	4 6	.. ..	.. ..	.. ..	3 4	.. ..	1 1	.. ..	.. 1	6 5	.. ..	.. ..	.. ..	2 4	2 ..	1 ..	1 ..	.. 1
14 Meningitis	M. F.	6 5	1 1	2 ..	1 1	2 1	.. ..	.. 1	.. 1	.. ..	8 5	.. ..	2 1	2 2	.. ..	1 1	1 1	2..	....
15 Organic heart disease	M. F.	161 208	.. ..	.. ..	.. ..	3 2	6 3	4 7	47 47	101 149	151 196	.. ..	.. ..	.. ..	1 2	.. ..	9 5	40 35	101 154
16 Bronchitis	M. F.	87 92	7 6	1 2	1 ..	.. 1	.. ..	1 2	14 6	63 75	70 75	9 9	2 3	.. 2	.. ..	1 ..	.. ..	4 7	54 54
17 Pneumonia (all forms)	M. F.	61 48	14 9	3 2	2 2	.. ..	5 1	10 10	14 7	15 17	59 38	10 2	4 2	2 3	2 6	3 3	3 3	19 8	16 11
18 Other respiratory diseases	M. F.	25 13	2 ..	.. ..	4 ..	2 ..	1 ..	3 1	6 2	7 10	10 12	1 ..	.. ..	.. 1	.. ..	.. ..	1 1	1 5	7 5
19 Diarrhœa, etc. ..	M. F.	20 15	13 5	1 ..	.. 2	1 ..	.. ..	.. 2	1 1	4 5	22 10	11 2	.. 1	.. ..	.. ..	.. ..	.. ..	5 2	6 5
20 Appendicitis and Typhlitis	M. F.	8 7	.. ..	.. ..	1 ..	5 5	1 1	1 ..	.. 1	.. ..	6 11	.. ..	.. ..	.. ..	1 4	1 4	2 1	1 1	1 1
21 Cirrhosis of Liver	M. F.	6 5	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	3 4	3 1	4 3	.. ..	.. ..	.. ..	.. ..	.. ..	.. 1	3 1	1 1
21A Alcoholism	M. F.	1 1	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	1 1	.. ..	2 ..	.. ..	.. ..	.. ..	.. ..	.. ..	1 ..	.. ..	1 ..
22 Nephritis and Bright's disease	M. F.	45 36	.. ..	.. ..	.. ..	.. 3	1 ..	4 4	16 12	24 17	40 31	.. ..	.. ..	.. ..	.. ..	.. 1	7 2	17 12	16 16
23 Puerperal Fever	M. F.	.. 3	.. ..	.. ..	.. ..	.. ..	.. ..	.. 3	.. ..	.. ..	.. 6	.. ..	.. ..	.. ..	.. ..	1 ..	5..	....	....
24 Parturition, apart from puerperal Fever	M. F.	.. 10	.. ..	.. ..	.. ..	.. ..	.. ..	10 ..	.. ..	.. ..	.. 15	.. ..	.. ..	.. ..	.. ..	1 ..	14..	....	....
25 Congenital debility, etc.	M. F.	46 54	45 51	.. ..	.. ..	.. ..	.. 1	1 2	.. ..	.. ..	53 54	50 53	.. ..	1 1	2..	....	....	....	....
26 Violence, apart from suicide	M. F.	36 19	4 2	.. 1	1 1	3 ..	4 ..	5 ..	11 5	8 10	50 26	3 3	1 1	2 1	7 5	3 1	9 3	14 6	11 6
27 Suicide	M. F.	14 4	.. ..	.. ..	.. ..	.. ..	.. ..	2 1	5 3	7 ..	22 6	.. ..	.. ..	.. ..	.. ..	1 ..	5 3	12 3	4 ..
28 Other defined diseases	M. F.	460 528	36 17	.. 2	4 1	9 10	8 1	25 38	96 83	282 376	469 475	27 21	1 3	1 1	10 3	9 9	25 27	93 85	303 326
29 Causes ill-defined or unknown	M. F.	5 6	.. ..	.. ..	.. ..	.. ..	1 ..	.. ..	3 3	2 2	9 10	1 1	.. 1	2 ..	.. ..	.. ..	1 5	2 ..	4 2

1920.

SUMMARY OF SANITARY INSPECTORS' REPORTS.

[illegible]

TABLE XV.
1920.
SUMMARY OF SANITARY INSPECTORS' REPORT
RURAL DISTRICTS.

[illegible]

